

ADMISSION APPLICATION FORM



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For the _____ / _____ Academic Year

To apply for admission, simply complete the form in BLOCK CAPITALS

Once completed, please send the entire form to us at:

Ajibak International School of Science & Technology,

Plot 67 - 73 Ajibak Technology Crescent, Odo-Ona, Cele Rainbow, Ibadan, Oyo State, Nigeria

1. Personal Details

Surname:

First Name:

Middle Name:

Date of Birth:

Age on 1st Sept.:

Place of Birth:

Sex:

Home Address:

Nationality:

State of Origin:

Local Government:

Previous School (If any):

Class Applying for:

Religion:

Denomination:

Any Disability or Sickness: Yes No Blood Group:

If Yes, kindly indicate the type of disability:

Telephone/Mobile:

Email Address:

2. Physical Information

Immunisations Received (e.g. BCG, OPT, HBV):

Speech Development: Average Slow Fast

Family Doctor's Name: Phone No.:

Address:

3. Sponsorship

This can be the parent or Guardian of the Applicant

Name:

Relationship:

Occupation/Business:

Address:

Telephone:

Signature/Date:

4. Payment Options (Please Tick)

I enclose a Draft Bank Teller Cash Bank Transfer

All Payment should be in favour of AISST:

Signature: Date:

5. Date Agreement

All data provided by you on this Application form will be used by the school authority for administrative purposes relating to your admission. The school may also contact you by post from time to time with news and information on its programmes and events.

Should we wish to contact you in the future by electronic means and you are happy for us to do so, then please indicate your consent by ticking the relevant opt-In box as follows:

By Email (); SMS ()

6. Declaration by Applicant

I declare that all information made above are correct and understand that studentship will be rescinded if the information is later found to be false or misleading. I agree that in the event of my being admitted, I will be governed by the code of conduct and the regulations of the school and I will advance the objectives of the school as far as shall be in my power as long as I shall remain a student of AISST.

Signature: _____

Date: _____

For office use only

Fee: _____

Date received: _____

Signed: _____

Approved: Yes No

Class admitted: _____

Admission Officer's Comment

Signature: _____

Date: _____

Ajibak International School of Science & Technology

Plot 67 - 73 Ajibak Technology Crescent, Odo-Ona, Cele Rainbow, Ibadan,
Oyo State, Nigeria.

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